

City of Phoenix AFFIDAVIT OF LAWFUL PRESENCE (Mail-in Version Only)

Your completion of this form is required by Arizona state law. A.R.S. §§ 1-501 and -502.

| I, | | (prir | nt full name exactly as on document |
|--|---|---|-------------------------------------|
| that I have atta | ched that copy to this Affidavit | have made a true and accurate for purposes of mailing both d | copy of the document checked belo |
| | zona driver license issued after i Print first four numbers/letters | | |
| | zona non-operating identificatio Print first four numbers/letters | | |
| of t | th certificate or delayed birth ce he U.S. Year of birth:; P | • | - |
| □ Uni | ted States Certificate of Birth A Year of birth:; P | broad. lace of birth: | |
| | ted States Passport. Print first four numbers/letters | on Passport: | |
| | eign Passport with United State Print first four numbers/letters Print first four numbers/letters | on Passport: | |
| | Form with a photograph. Print first four numbers on I-94 | 4: | |
| | CIS Employment Authorization Print first four numbers/letters or Perm. Resident Card (accept | on EAD: | |
| □ Ref | ugee Travel Document. Date of issuance: | ; Refugee country: | |
| | . Certificate of Naturalization. Print first four digits of CIS Re | g. No.: | |
| | . Certificate of Citizenship. Date of issuance: | ; Place of issuance: | |
| | bal Certificate of Indian Blood. Date of issuance: | ; Name of tribe: | |
| | bal or Bureau of Indian Affairs Year of birth:; P | | |
| Signed | : | Dated: | |
| | Only Employee Name: | | Ref. No.: |
| Promptly report all observed violations of federal immigration law to: azicereport@dhs.gov | | | |
| ☐ Reported violation (check if applicable); Date/Time Reported: | | | |

INSTRUCTIONS FOR USE

- 1. You must be the *owner* of the business in order to complete this form.
- 2. Locate one form of your identification that is on the list.
- 3. Make a clear and legible photocopy of that identification document. If the document is more than one page, such as a passport, copy only those pages that contain your name, photograph, date of birth, and document number.
- 4. Clearly and legibly print your name at the top of the Affidavit form *exactly* as it appears on the identification document you have selected.
- 5. Check the box on the Affidavit form that corresponds to the identification document you have selected.
- 6. Complete the boxes and/or descriptive information as applicable to the form of ID you have selected. Please do *not* provide any additional information on the form.
- 7. Sign the form at the bottom.
- 8. Date the form.
- 9. Either mail, email or fax the form and the *copy* of your ID to:

City of Phoenix Attn: Finance Department, Purchasing Division 251 W. Washington Street, 8th Floor Phoenix, AZ 85003

Facsimile No.: 602-732-2750

Email: purchasing@phoenix.gov

NOTE: Do not mail us your original ID. The copy of your ID will be destroyed.